

**DEVENS RESERVE FORCES TRAINING AREA
LEGAL ADVISOR'S OFFICE, CLAIMS
BOX 5, 30 QUEBEC STREET
DEVENS, MASSACHUSETTS 01434-4479
(978-796-2701)**

HOUSEHOLD GOODS CLAIMS INSTRUCTIONS
(follow carefully for speedy consideration of your claim)

DOCUMENTS NEEDED TO PROCESS A CLAIM

1. **DD FORM 1840/1840R.** NOTICE OF LOSS OR DAMAGE (pink form)- This document should be given to you by the carrier.
2. **GOVERNMENT BILL OF LADING (GBL).** This document should be given to you by the carrier or maybe obtained through the destination Transportation Office.
3. **DD FORM 1842.** CLAIM FOR LOSS OF OR DAMAGE TO PERSONAL PROPERTY INCIDENT TO SERVICE (see sample)
4. **DD FORM 1844.** LIST OF PROPERTY AND CLAIMS ANALYSIS CHART (see sample)
5. **ESTIMATES.** SEE SECTION 111, PARAGRAPH 3, BELOW FOR MORE INFORMATION.
6. **ORDERS.** One copy of PCS, ETS, or other orders or document authorizing shipment.
7. **INVENTORY.** Your copy of the pickup inventory (Photo copies are not accepted). When completing your claim forms (DD Form 1844), The inventory number of each line item must be listed in the block "INV. NO." In addition, you must circle the inventory numbers of the items being claimed on the inventory.
8. **STORAGE AUTHORIZATION.** A copy of DD FORM 1164 is required for local deliveries from non-temporary storage
9. **MISSING ITEM STATEMENT.** SEE EXAMPLE PROVIDED.

II. PREPARATION FOR FILING YOUR CLAIM.

1. **FIRST IMPORTANT TIME LIMIT (DD FORM 1840/1840R).** Written notice must be given to the carrier within 70 days after delivery. **THIS NOTICE IS NOT YOUR CLAIM.** If you have not received instructions for handling the DD FORM 1840/1840R (NOTICE OF LOSS/DAMAGE STATEMENT), contact the nearest claims office without delay.

2. **SECOND IMPORTANT TIME LIMIT.** Your claim against the Government for the loss/damage must be submitted within two years from the date of delivery. The claim must be in the Claims Office's possession before or at the 2 year limit.

3. **PRIVATE INSURANCE.** If you have any policy of insurance that may provide coverage of your loss, then you may elect to make a demand (claim) against the company prior to or concurrent with submission of your claim against the government. (THIS REQUIREMENT IS NO LONGER MANDATORY.) Once you present your claim to the government, your right to file against the insurance company is barred. To prevent delays, problems and unnecessary paperwork, it is preferable that you completely settle the claim with your insurance company before filing a claim with us.

4. **DISPOSITION OF PROPERTY. DO NOT DISPOSE** of any damaged or destroyed property until authorized to do so by the Claims Office. It must be kept available for further inspection by the transportation office and often by the carrier. In addition, if you are paid the full depreciated value of an item, it will become either government property or the carrier's property and you may be requested to turn it over for salvage to either agency.

5. **COPIES OF DOCUMENTS.** The claims office cannot make personal copies of claims documents for you. Therefore, if you desire to keep copies, please make them before you file your claim.

III. SUBSTANTIATING AND DOCUMENTING YOUR CLAIM.

1. It is the responsibility of the claimant to substantiate ownership or possession, the fact of the loss or damage, and the value of the property claimed. Failure to comply with regulations and these instructions may cause excessive delays or disapproval of portions or all of your claim.

2. **SIZE IS VITAL.** It is important that all descriptions be consistent on all documents. You must list the exact size and specific description and include the damage as listed on the 1840/1840R on the SCHEDULE OF PROPERTY (DD FORM 1844.) This must be consistent with the Government Inspection Report (DD Form 1841) and on estimates of repair or replacement costs. Correct descriptions are important, for example, carpets (10X12) shag or oriental, dressers 4,5, drawer, mattress, box springs, headboards, (Twin, Queen, King) and televisions 19, 25, 32)

3. **ESTIMATES/RECEIPTS.** Itemized receipts for repairs or repair estimates for damaged items must be obtained in writing on the letterhead or other suitable form of a reputable firm. It must list the exact size, specific description of the items(s) and the damage. **IF THE REPAIRMAN DETERMINES THAT AN ITEM IS NOT ECONOMICALLY REPAIRABLE ASK HIM TO WRITE THIS ON THE ESTIMATE ALONG WITH THE SALVAGE VALUE OR TRADE-IN VALUE, IF ANY.** Our office requires estimates for all items claimed over \$99.00 per item. If an

item is determined by the repair firm as non repairable, also provide a current replacement cost in writing or a catalog cut-out which includes the price to replace the item. If any repair involves re-upholstery work, you must make sure the estimator states separately the cost of material and labor. Often times the cost to reupholster an item exceeds its value, therefore, also provide a current replacement cost for that item. Claims for **MECHANICAL/ELECTRICAL** internal damage must be substantiated by the technician as occurring incident to shipment. Without such verification, the claim will not be considered. **ALSO ATTACH A WRITTEN STATEMENT ATTESTING TO THE WORKING CONDITION OF THE ITEM JUST PRIOR TO SHIPMENT. ESTIMATES MUST REFLECT THE COST FOR REPAIRING THE DAMAGE WHICH OCCURRED IN SHIPMENT (NOT PRE-EXISTING DAMAGE).** You should carefully check the pick-up inventory and furnish accurate information to the estimator to insure a proper estimate. A second estimate may be required at the Claims Examiner's discretion.

4. **AGREED COST OF REPAIRS.** As an exception to the requirement for receipts or estimates of repair, the Claims Examiner can agree with the claimant on any reasonable cost of repair per item not to exceed \$100.00. This does not mean you should claim \$99.00 per item, but a fair and reasonable amount based on the actual damage caused in shipment. Providing photographs of the damaged property is an excellent source of expediting your claim.

5. **REPLACEMENT COST.** It is your responsibility to substantiate replacement cost of items lost or not economically repairable. Values cannot be accepted unless evidence establishes that the replacement item submitted by the claimant is in fact identical or similar to the item that was lost. Receipts of purchase are helpful especially if the item claimed is a recent purchase. Other means of substantiation may include: prior appraisals, bills, finance statements, photographs, owner's manuals, statements from disinterested parties who can describe the lost item in sufficient details. Provide catalog cut outs that include the current replacement cost of the particular item.

IV. FILING YOUR CLAIM.

Review and compare your claims forms and documents to these instructions. If you have any questions or problems, please contact us in person or by telephone. Our office is located in Moore Hall, Building 666, First Floor, Room 145. Telephone Number is at the top of these instructions. Your completed claims packet can be mailed or hand-delivered. SEE ADDRESS AT THE TOP OF THESE INSTRUCTIONS.

V. AWAITING SETTLEMENT.

Upon receipt, your claim will be screened. If you have properly completed your part, your file will be processed as quickly as possible. If further information is required, we will contact you. If claim is settled, any communication, letter, notice of items recovered, offer, check from carrier should be promptly reported to this office.

FURNITURE REPAIRS

PLEASE USE YOUR LOCAL YELLOW PAGES FOR OBTAINING ESTIMATES
FROM QUALIFIED REPAIRMEN

LOOK FOR FURNITURE REFINISHERS (FOR FURNITURE REPAIR)
LOOK UNDER ELECTRONICS FOR ELECTRICAL REPAIRS

NOTE THAT ESTIMATE FEES ARE REIMBURSED AS LONG AS THEY ARE NOT
EXCESSIVE. UP TO \$100.00-\$125.00

Contact our office if you need assistance

(978) 796-2701

MISSING ITEM STATEMENT

SWORN STATEMENT

Items(s) number (ed) __ - __, ____,____ and ____ on the attached DD FPORM 1844 were owned or possessed and used prior to the move, but were not delivered by the carrier.

After my Household goods were packed at origin, I checked all rooms in the house to ensure nothing was left behind and it appeared that all items had been packed by the carrier.

SPECIFIC ITEMS(S):

INVENTORY NUMBER

NAME OF ITEM

SIGNATURE: _____

DATE: _____

****THIS STATEMENT MUST BE HAND WRITTEN BY SERVICE MEMBER****

SAMPLE